		PPLICATIO Effect	N FEE DE ive Octobe			ON RECOF	30		095	170	£12	•	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								L EN	YTITY		OTHER SMALL	THAN	
	TAL CLAIMS		11				TYPE	E	FEE	ĺ	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	ĺ
TOT	AL CHARGEAE	LE CLAIMS	// _ min	us 20=	. 4	ď)=		OR	X\$18=		
INDEPENDENT CLAIMS			9minus 3 =		. 4		X40	_			X80=		
MULTIPLE DEPENDENT CLAIM PRESENT										OR			
* If the difference in column 1 is less than zero, enter "0" in column 2								=		OR	+270=		
11 (•					O. O. C.	TOTA	VL.		OR	TOTAL OTHER	710.0	į.
	CL	AIMS AS A (Column 1)	MENDED	- PAN (Colu		(Column 3)	SMA	LLI	ENTITY	OR	SMALL		
ENT. A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	ÆST BER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total.	. 25 11	Minus	·@		- S	X\$ 9	=		OR	X\$18=		
	independent .		Minus	***	ა	=	X40	-		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135	_		OR	00.00	20.00	
								TAL		00	TOTAL ADDIT. FEE	30.085	290
	······································	(Column 1) CLAIMS	, , ,		mn 2) HEST	(Column 3)				3	·		ļ
N B	•	REMAINING AFTER AMENDMENT		NUM PREVI	ABER IOUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	.11 25	Minus	., 20 2	25	= —	X\$ 9	<u>.</u>		OR	X\$18=		
ME	Independent	•	Minus	•••	3	=	X40	=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=		OR	+270≖		
							TO ADDIT.	TAL		OR	TOTAL		
4	112/05	(Column 1)		(Colu	ımn 2)	(Column 3)	, noon,						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DIME	Total	. 21	Minus		20	= 7	XS	=		OR	X\$18=	350	
Z EN	Independent	· 3	Minus		3	=	X40			}	¥6.5=	1	1
Ā	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 -	Cñ		 	1
				• •	·		+135			OR	+270=		1
••	if the "Highest Nb:	mn 1 is less than t mber Previously F	Paid For IN TH	IS SPACE	is less th	an 20, enter "20."	ADDIT.	TAL		OR	ADDIT. FEE	350	4
•••	il the "Highest Nu The "Highest Nur	imber Previously F nber Previously Pa	Paid For IN TH aid For (Total o	is space i Indepen	ts ress th dent) is th	an 3, enter 3." e highest numbe	r found in th	e ap	propriate bo	nx in ca	olumo 1.		

FORM PTO-875 (Rev. 8/00) Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE 1U.S. GPO: 2000-460-706/30103

Application or Docket Number